

PTO/SB/82 (09-03)

Approved for use through 11/30/2005, OMB 0651-0035

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/660,250
	Filing Date	9/11/2003
	First Named Inventor	Roberts et al.
	Art Unit	3723
	Examiner Name	
	Attorney Docket Number	099U1D2

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☐ The address associated with
Customer Number:

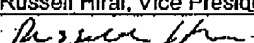
OR

<input checked="" type="checkbox"/> Firm or Individual Name	Rohm and Haas Electronic Materials CMP Holdings, Inc.				
Address	1105 North Market Street				
Address	Suite 1300				
City	Wilmington	State	DE	Zip	19899
Country	USA				
Telephone	302 366-0500	Fax	302 283-2144		

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
SIGNATURE of Applicant or Assignee of Record

Name	Russell Hiral, Vice President and Secretary		
Signature			
Date	July 9, 2004	Telephone	302 366-0500

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/81 (09-03)

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	10/660,250
	Filing Date	9/11/2003
	First Named Inventor	Roberts et al.
	Title	POLISHING PADS AND METHODS RELATING THERETO
	Art Unit	3723
	Examiner Name	
	Attorney Docket Number	099U1D2

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
Blake T. Biederman	34,124
Edwin Oh	45,319
Kenneth A. Benson	27,971

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

☒ Firm or Individual Name: Rohm and Haas Electronic Materials CMP Holdings, Inc.

Address: 1105 North Market Street

Address: Suite 1300

City: Wilmington

State: DE Zip: 19898

Country: USA

Telephone: 302 366-0500

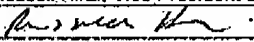
Fax: 302 283-2144

I am the:

☐ Applicant/Inventor

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Russell Hirai, Vice President and Secretary		
Signature			
Date	July 9, 2004	Telephone	302 366-0500

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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